

SENATE

BILLS FOLLOWING LIST FOR 1999-2000 SESSION

October 19, 2000

Bill No.	Author	Law or Code	Summary
SB 5 Chap. 537 Stats. 99 Sen 40-0 Assm 77-2	Rainey	Knox-Keene Act	<u>As Enacted:</u> Requires plans to provide coverage for the screening, diagnosis and treatment of breast cancer.
SB 7 DIED	Figueroa & Leslie	Business & Professions Code Knox-Keene Act	<u>As Amended:</u> Provides that any person who makes a decision regarding medical necessity or appropriateness that affects any diagnosis, treatment, operation, or prescription without possessing a valid, unrevoked, or unsuspended certificate under the Medical Practice Act is guilty of a misdemeanor.
SB 18 DIED	Figueroa	Business & Professions Code Knox-Keene Act	<u>As Amended:</u> Amends the Business & Professions Code to require any person (except a physician) who makes a decision regarding medical necessity or appropriateness that denies, significantly delays, terminates, or otherwise limits any diagnosis, treatment, operation, or prescription to possess a valid certificate or license to practice the relevant healing arts profession; states that in making such a decision that person is acting within the person's scope of practice as defined by the licensing entity; and amends the KKA to require disclosure to the public of the process and criteria the plan uses to authorize or deny health care services.
SB 19 Chap. 526 Stats. 99 Sen 31-2 Assm 74-3	Figueroa	Civil Code Knox-Keene Act	<u>As Enacted:</u> Amends the Confidentiality of Medical Information Act to: prohibit the unauthorized intentional selling, sharing or use of medical information for any purpose not necessary to provide health care services; amend the definition of medical information; and increase penalties for violations. Amends the Knox-Keene Act to add protections against, and penalties for, the unauthorized disclosure of medical records and to require plans to prepare and make available upon request, a statement describing their policies and procedures for ensuring the confidentiality of medical information.
SB 21 Chap. 536 Stats. 99 Sen 22-9 Assm 71-3	Figueroa	Knox-Keene Act	<u>As Enacted:</u> Enacts the Managed Health Care Insurance Accountability Act of 1999 which requires plans and managed care entities to have a duty of ordinary care to arrange for the provision of medically necessary health care services to subscribers and enrollees, as specified.

Note: 1. Department of Managed Health Care (DMHC), formerly Department of Corporations (DOC), hereafter referred to as Department.
2. Bills listed as "DIED" did not reach the full Senate or Assembly.

Bill No.	Author	Law or Code	Summary
SB 41 Chap. 538 Stats. 99 Sen 25-11 Assm 45-26	Speier	Insurance Code	<u>As Enacted:</u> Requires certain individual and group policies of disability insurance that are issued, amended, delivered, or renewed on or after January 1, 2000, to provide coverage, under the same terms and conditions applicable to other benefits, for a variety of federal FDA approved prescription contraceptive methods, subject to exemption of religious employers.
SB 48 VETOED (2000) Sen 40-0 Assm 78-0	Sher	Public Records Act	<u>As Enrolled:</u> Amends the PRA to allow persons to appeal to the Attorney General any public agency's denial to inspect public records.
SB 59 Chap. 539 Stats 99 Sen 24-9 Assm 74-5	Perata	Knox-Keene Act	<u>As Enacted:</u> Sets forth procedures and timeframes for plans for reviewing and responding to authorization requests from providers for the provision of health care services to enrollees; and requires plans to disclose to the public, upon request, the criteria or guidelines used to determine whether to authorize, modify, or deny health care services.
SB 64 Chap. 540 Stats. 99 Sen 25-9 Assm 76-4	Solis	Knox-Keene Act	<u>As Enacted:</u> Requires (1) plans, except specialized plans, to include coverage for certain specified equipment and supplies for the management and treatment of insulin-using diabetes, non-insulin-using diabetes, and gestational diabetes as medically necessary, even if the items are available without a prescription, (2) plans, except specialized plans, that cover prescription benefits to include coverage for certain diabetes related prescription items if determined to be medically necessary, and (3) plans to provide coverage for diabetes outpatient self-management training, education, and medical nutrition therapy and for additional training, education, and therapy, as specified.
SB 71 DIED	Murray	Civil Code	<u>As Introduced and Amended:</u> Prohibits a person, as defined, from engaging in "biometric identification or verification" unless certain conditions are met.
SB 73 VETOED (2000) Sen 23-14 Assm 61-16	Murray	Government & Public Contract Codes	<u>As Introduced:</u> Requires a state agency to award a contract to the lowest responsible bidder who either meets, or makes a good faith effort to comply with, participation goals for designated business enterprises.

Bill No.	Author	Law or Code	Summary
SB 75 VETOED (1999) Sen 23-13 Assm 41-38	Murray	Family & Probate Codes	<u>As Enrolled:</u> Establishes the Domestic Partnership Act of 1999, to define “domestic partners” and provide for the registration of domestic partnerships with the Secretary of State; requires a health facility to allow a patient’s domestic partner and other specified persons to visit the patient, except as provided; and revises the Probate Law to allow the participation of domestic partners in conservatorships and the inclusion of domestic partners as beneficiaries under statutory will forms.
SB 86 VETOED (1999) Sen 25-13 Assm 45-30	Murray	Elections Code	<u>As Enrolled:</u> Requires various state and local public agencies to provide voter registration information to specified persons.
SB 97 Chap. 155 Stats. 99 Sen 23-10 Assm 46-26	Burton	Health & Safety Code	<u>As Enacted:</u> Prohibits health care facilities, other than long-term care facilities, from discriminating against employees and patients for filing complaints.
SB 106 DIED	Polanco	Knox-Keene Act	<u>As Introduced:</u> Repeals the Medi-Cal provisions and re-enacts these provisions as the California Health Services Program. <u>As Amended:</u> Amends the Medi-Cal program to adopt data reporting requirements and health objectives.
SB 114 VETOED (1999) Sen 24-9 Assm 46-29	Escutia	Knox-Keene Act	<u>As Enrolled:</u> Requires plans offering Medicare supplement contracts to provide such contracts on a guaranteed basis to disabled Medicare beneficiaries under age 65 terminated from Medicare managed care contracts, and prohibits the premium rates for Medicare supplement contracts for disabled Medicare beneficiaries under age 65 from exceeding the highest rate for persons 65 years of age under the same contract.

Bill No.	Author	Law or Code	Summary
SB 129 Chap. 984 Stats. 00 Sen 40-0 Assm 64-12	Peace	Business & Professions, & Civil Codes	<u>As Enacted:</u> Establishes within the Department of Consumer Affairs the Office of Privacy Protection, the purpose of which would be to protect the privacy of individuals' personal information by identifying consumer problems and facilitating development of fair information practices, as specified. Requires the office to inform the public of potential options for protecting the privacy of, and avoiding the misuse of, personal information, as specified, and to make recommendations to organizations for privacy policies, as specified, among other things. Requires each state department or state agency to designate a position therein, the duties of which would include, but not be limited to, responsibility for the privacy policy within the department or agency. Requires the Director of the Department of Consumer Affairs, commencing in January 2003, to report to the Legislature on an annual basis, as specified.
SB 148 Chap. 541, Stats. 99 Sen 26-6 Assm 70-6	Alpert	Knox-Keene Act	<u>As Enacted:</u> Requires plans, on or after July 1, 2000, to provide coverage for the testing and treatment of PKU, including formulas and special food products.
SB 153 DIED	Haynes	Government Code	<u>As Introduced:</u> Enacts the Property Owners Rights Act of 1999, which among other things, requires public agencies to minimize the number of agency actions that may significantly impair the use of private property and requires public agencies to conduct private property taking impact analyses prior to taking specified actions.
SB 160 Chap. 50 Stats. 99 Sen 36-3 Assm 69-10	Peace		1999-2000 Budget Bill.
SB 168 Chap. 845 Stats. 00 Sen 21-0 Assm 71-0	Speier	Insurance Code	<u>As Enacted:</u> Prohibits a risk-based contract between a health care service plan and a physician or physician group that is issued, amended, delivered, or renewed in this state on or after January 1, 2001, from including a provision that requires a physician or a physician group to assume financial risk for the acquisition of required immunizations for children as a condition of accepting the risk-based contract. Provides that a physician or physician group shall not be required to assume financial risk for immunizations that are not part of the current contract. Requires plans to reimburse physicians or physician groups for immunizations that are not part of the current contract at not less than a specified amount, until the contract is renegotiated. Prohibits a health care service plan from including the acquisition or costs associated with required immunizations for children in the capitation rate of a physician who is individually capitated.

Bill No.	Author	Law or Code	Summary
SB 169 DIED	Speier	Insurance Code	<u>As Introduced and Amended:</u> Prohibits PERS, Managed Risk Medical Insurance Board, California Medical Assistance Commission, and Department of Health Services from contracting with or renewing a contract with a plan that both participates in the federal Medicare managed care program and terminates coverage for Medicare managed care enrollees due to a withdrawal from or reduction in a service area, unless the plan offers Medicare coverage throughout the plan's entire services area.
SB 172 VETOED (1999) Sen 24-13 Assm 50-26	Escutia	Labor Code	<u>As Introduced and Enrolled:</u> Extends the requirements permitting inspection of personnel files by employees to public entity employees. Specifies procedures by which employees could request corrections and deletions of material in their personnel files.
SB 173 DIED	Alpert	Knox-Keene Act	<u>As Introduced:</u> Requires the Department: (1) on or before July 1, 2000, to allocate funding, derived from annual assessment fees on plans, for an independent health care ombudsman program under which 3 projects in different regions of the state would receive funding to provide enrollees with counseling, advice, assistance, and advocacy services; and (2) to submit a final evaluation report on the independent health care ombudsman program to the Legislature by March 1, 2003. <u>As Amended:</u> Creates a regulatory scheme for consumer discount health care programs within the Department of Managed Health Care that explicitly provides that such programs are not health care service plans subject to the Knox-Keene Health Care Service Plan Act of 1975.
SB 189 Chap. 542, Stats. 99 Sen 34-1 Assm 78-2	Schiff	Knox-Keene Act	<u>As Enacted:</u> Expedites plan and Department reviews of enrollee grievances; repeals the existing review system for coverage decisions involving experimental treatment; and adds provisions relating to the independent review system established by AB 55 (Migden-1999).
SB 195 Chap. 389 Stats. 00 Sen 39-0 Assm 62-0	Chesbro	Knox-Keene Act	<u>As Enacted:</u> This bill permits a plan that does not operate statewide, and which is permitted only one geographic region for rating purposes, to have two geographic regions if the plan operates in more than one county and no county is divided into more than one region

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SB 205 Chap. 543, Stats. 99 Sen 24-11 Assm 74-6	Perate	Knox-Keene Act	<u>As Enacted:</u> Requires, on or after July 1, 2000, coverage for all generally medically accepted cancer screening test, subject to all terms and conditions that might otherwise apply.
SB 217 DIED	Baca	Knox-Keene Act	<u>As Introduced:</u> Requires every plan to report and make available to the public information on complaints received and resolved in less than 30 days, requires the Department to create a standard product description for all plans similar to the CalPERS model to facilitate comparison by consumers; requires plans to provide to the public upon request information on providers within their network, complaints, and financial arrangements with providers; requires plans to maintain a toll-free telephone number staffed during business hours to receive requests for the disclosure of information and permits plans to forgo creating individual and small group contract benefit matrixes. <u>As Amended:</u> Requires that the public policy procedures of plans include an annual satisfaction survey of the plan's subscribers and enrollees. Requires Department, on or before May 1, 2000, to approve a survey format, methodology, and reporting format and to approve an entity to certify survey vendors. Requires plans to use the approved survey format and to report results of the survey to Department. Requires Department to place results of the surveys on its Internet web site, as specified.
SB 240 Chap. 652, Stats. 99 Sen 32-1 Assm 73-1	Speier	All DOC Laws	<u>As Enacted:</u> Makes various changes to many child support enforcement statutes to improve the effectiveness of child support collection, including the statute that authorizes state agencies to deny the renewal of a business or professional license or to suspend an existing business or professional license for persons who are in arrears of their child support payments by extending its provisions to any individual who is either listed on the license or who qualifies the license when the licensee is an entity.
SB 254 DIED	Speier	Knox-Keene Act	<u>As Introduced and Amended:</u> Establishes an independent review system for resolving enrollee complaints against plans; repeals the existing review system for coverage decisions involving experimental treatments; and expedites plan and Department review of enrollee complaints.

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SB 260 Chap. 529, Stats. 99 Sen 22-11 Assm 42-32	Speier	Knox-Keene Act	<u>As Introduced:</u> Prevents a plan from utilizing compensation arrangements that include financial bonuses or penalties related to the delivery of health care services; and prohibits plans from establishing financial arrangements with any group of thirty or fewer providers that utilizes capitation payments that includes cost of referrals for the group's patients. <u>As Enacted:</u> Creates the Financial Solvency Standards Board within the Department of Managed Health Care; places a moratorium on the issuance of limited licenses to risk-bearing organizations; and set forth various contracting standards and protections.
SB 265 Chap. 810 Sen 28-7 Assm 60-16	Speier	Knox-Keene Act	<u>As Enacted:</u> Generally enacts into law the federal Health Insurance Portability and Accountability Act and requirements governing individual coverage that entitles "eligible" individuals to purchase coverage on a guaranteed basis under specified terms and conditions, and enacts premium limitations for the coverage.
SB 271 DIED	Speier	Knox-Keene Act	<u>As Introduced:</u> Requires certain plan contracts to offer extended continuation coverage as specified to employees and their spouses from the age of 55.
SB 276 DIED	Polanco	Health & Satety Code	<u>As Amended:</u> Establishes the Healthy Californians Act of 1999, for the purpose of measuring and improving health outcomes and to achieve universal health care for all Californians by January 1, 2005.
SB 292 DIED	Figueroa	Knox-Keene Act Insurance Code	<u>As Introduced:</u> State legislative intent to establish a neutral third party review process that is specific to the unique characteristics of dental plans. <u>As Amended:</u> Requires dental plans to provide a second opinion upon an enrollee's request, as specified.
SB 337 DIED	Figueroa	Knox-Keene Act	<u>As Introduced:</u> Prohibits plans from expending or allocating, on an annual basis, more than 15% of gross revenues for administrative costs. Requires the Department to annually report to the Legislature and the public, the administrative costs of every plan.
SB 349 Chap. 554, Stats.99 Sen 24-12 Assm 77-1	Figueroa	Knox-Keene Act	<u>As Enacted:</u> Requires plans to provide coverage for the additional screening, examination and evaluation of a patient to determine whether a psychiatric emergency medical condition exists, and the care and treatment necessary to relieve or eliminate the emergency medical condition.
SB 362 DIED	Alpert	Knox-Keene Act	<u>As Introduced and Amended:</u> Requires coverage for the screening and diagnosis of ovarian cancer.

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SB 420 DIED	Figueroa	Knox-Keene Act	<u>As Introduced and As Amended:</u> States that it is the intent of the Legislature to transfer the regulation of managed care oversight to the Department of Managed Care Oversight (DMCO) within the California health & Human Services Agency.
SB 421 DIED	Figueroa	Knox-Keene Act	<u>As Introduced:</u> Adds the Figueroa Health Care Clinical Practice Guidelines of 1999 to regulate the manner in which clinical practice guidelines are developed by plans.
SB 422 DIED	Figueroa	Knox-Keene Act	<u>As Amended:</u> Requires any communication of a denial or modification by a plan or its contracting medical groups and independent practice associations of a request for prior authorization to be communicated to the enrollee in writing and to providers, initially by telephone, and then in typewritten form, and requires any such written communication to a provider to include the name and telephone number of the health care professional responsible for the denial.
SB 468 DIED	Polanco	Knox-Keene Act	<u>As Introduced and Amended:</u> Requires plan contracts to provide coverage for the diagnosis and medically necessary treatment of mental illness under the same rates, terms and conditions as generally applied to other medical conditions.
SB 480 Chap. 990 Stats. 99 Sen 23-15 Assm 46-30	Solis	Knox-Keene Act	<u>As Introduced:</u> Requires health care coverage to be universally available to every resident of California as of July 1, 2003. Requires Health & Human Services Agency to develop a report for the Legislature recommending the financing and delivery of such coverage. <u>As Enacted:</u> Requires the Secretary of the California Health and Human Services Agency to report to the Legislature on the options for achieving universal health care coverage, including options for financing universal health coverage, the institutional mechanisms by which universal health coverage may be delivered, and the extent and scope of health care coverage that California residents may have.
SB 538 Chap. 899 Stats. 99 Sen 39-0 Assm 80-0	O'Connell	Health & Safety Code	<u>As Amended:</u> Authorizes San Luis Obispo County to establish a health authority to administer its hospital and family health centers and provides that nothing in the bill shall prevent access to any records by Department in the exercise of its powers under the KKA. <u>As Enacted:</u> Authorizes San Luis Obispo County to establish a health authority to administer its hospital and family health centers.
SB 559 Chap. 545 Stats. 99 Sen 40-0 Assm 77-1	Brulte	Knox-Keene Act	<u>As Enacted:</u> Requires, beginning July 1, 2000, an entity that pays for health care services to provide certain disclosures to health care providers regarding the entity's active encouragement of its members to use the providers' services, and permits providers to refuse to provide claims discounts to an entity that does not actively encourage its membership to use the providers' services through financial incentives or advertising.

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SB 737 Chap. 434 Stats. 99 Sen 40-0 Assm 77-0	Senate Insurance Committee	Knox-Keene Act	<u>As Introduced:</u> Conforms state law to federal regulations by providing that an eligible employee who has declined health care coverage from a small employer during a previous enrollment period may enroll himself or herself and his or her dependents when a person becomes a dependent of the eligible employee through marriage, birth, adoption, or placement for option. <u>As Enacted:</u> Requires a plan to provide certain employees with an open enrollment period upon the loss of other health care coverage, marriage, or the birth, adoption, or placement of a dependent.
SB 738 Chap. 802 Stats. 99 Sen 39-0 Assm 79-1	Senate Insurance Committee	Knox-Keene Act	<u>As Enacted:</u> Extends until 1/1/2005, the asset protection feature of the California Partnership for Long Term Care Pilot Program, a program applicable to long-term care policies and plan contracts that cover long-term care services, and would repeal the provisions which created a task force for purposes of this program and of which the Department was a member.
SB 764 Chap. 706 Stats. 00 Sen 40-0 Assm 75-0	Speier	Knox-Keene Act	<u>As Enacted:</u> Repeals the article in the Knox-Keene Act regulating Medicare supplement contracts issued by plans, and enacts other, similar, provisions that closely follow the National Association of Insurance Commissioners' (NAIC) Model Regulation to Implement the NAIC Medicare Supplement Insurance Minimum Standards Model Act, which incorporates federal legislative changes to Medicare Supplemental Insurance enacted in the federal Balanced Budget Act of 1997.
SB 820 Chap. 428 Stats. 99 Sen 40-0 Assm 78-0	Sher	Civil Code	<u>As Enacted:</u> Enacts the Uniform Electronic Transactions Act to give legal effect and enforceability to transactions in which records and signatures are created or transmitted electronically, with certain exceptions, and sets forth rules and procedures regarding the formation of contracts using electronic records, the sending and receiving of electronic records and signatures, changes and errors in transmission, and the retention of electronic records. Also provides that no state agency may require, prohibit, or regulate the use of an electronic signature in a transaction in which the agency is not a party unless a law other than this act expressly authorizes the requirement, prohibition, or regulation.
SB 835 VETOED Sen 33-3 Assm 69-5	Figueroa	Business & Professions Code	<u>As Amended and Enrolled:</u> Requires physicians and surgeons who perform cosmetic surgery, including physicians and surgeons who practice oral and maxillo-facial surgery and cosmetic surgery, to provide the Medical Board of California with information regarding his or her training and certification. Requires the Medical Board to make such information available to the public and to conduct random audits of the information submitted.
SB 843 DIED	Polanco	Government Code	<u>As Introduced and Amended:</u> Extends operation of the Department of Information Technology and elevates it to agency status.

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SB 875 DIED	Escutia	Government Code	<u>As Amended:</u> Requires each state agency to adopt policies and procedures that identify, manage, and protect those intellectual property rights deemed worthy of protection and to develop policies and procedures to identify and protect the intellectual property rights of individuals and entities with whom the state does business. Requires the State Auditor to perform an audit of the intellectual property owned, managed, or controlled by state agencies.
SB 880 DIED	Speier	Knox-Keene Act	<u>As Introduced and Amended:</u> Requires every plan contract that is issued, amended, renewed or delivered on or after 1/1/2000, to provide for reimbursement of providers of cervical cancer screening test and screening mammography at a rate equal to or greater than the reimbursement paid by the Medi-Cal program for those services.
SB 931 DIED	Polanco	Business & Professions Code	<u>As Introduced:</u> Provides that, for purposes of the anti-kickback provisions in the Business & Professions Code, "compensation or inducement" does not include a discount a provider offers to a health plan, or a reduction in price voluntarily provided by the health plan. <u>As Amended:</u> Amends provisions of the Business & Professions Code relating to barbering and cosmetology.
SB 1016 VETOED (1999) Sen 40-0 Assm 65-11	Bowen	Public Records Act	<u>As Introduced and Enrolled:</u> Prohibits a public or private employer from secretly monitoring e-mail or other personal computer records generated by an employee.
SB 1040 DIED	Vasconcellos	Knox-Keene Act	<u>As Introduced:</u> State legislative intent to create a California Task Force on Healthy California to convene a public process to examine and assess health care and to develop a plan to provide Californians the opportunity to attend successfully to their health care needs.
SB 1053 VETOED (1999) Sen 40-0 Assm 73-4	Poochigian	Knox-Keene Act	<u>As Enrolled:</u> Provides that no plan contract may prohibit an enrollee from choosing to obtain covered services for a condition that in the opinion of the primary care or treating physician has a likelihood of causing death, loss of limb, or loss of vital bodily function from any participating plan provider, in any geographic service area served by that plan regardless of the service area in which the enrollee is located if certain specified conditions are met.
SB 1065 VETOED (1999) Sen 31-7 Assm 68-6	Bowen	Public Records Act	<u>As Enrolled:</u> Amends the Public Records Act to require any agency that has identifiable public records in an electronic format to make that information available in electronic format, unless otherwise prohibited by law.
SB 1172 DIED	Johnson	Knox-Keene Act	<u>As Introduced:</u> Makes non-substantive changes to provisions of existing law relating to antifraud plans developed by health plans.

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SB 1177 Chap. 825 Stats. 00 Sen 40-0 Assm 49-19	Perata	Knox-Keene Act	<u>As Enacted:</u> Prohibits plans from engaging in unfair payment patterns. Increases penalties for not paying payment claims in a timely manner. Requires the Department to adopt regulations to define the terms “unfair payment pattern,” “complete and accurate claim,” and “unfair billing pattern.” Also requires the Department to adopt regulations regarding the plan’s provider dispute resolution system.
SB 1181 DIED	Polanco	Knox-Keene Act	<p><u>As Introduced:</u> Clarifies that plans to withdraw from a service area by a health plan will be considered a material modification to the health plan. Increases the existing notification periods for health plans withdrawing from a service area and makes other specified changes to the notification provisions. Requires Department to hold public hearings regarding a health plan’s plan to withdraw from a service area. Imposes specified requirements on health plans that wish to withdraw from a service area. Requires Department to submit an annual report to the Legislature that evaluates issues related to the provision of health care in rural areas.</p> <p><u>As Amended:</u> Permits a licensed health care service plan, including a specialized health care service plan, to offer a health care service discount program in which access to health care services and related products at a discount fee are offered, only if the health plan has filed an amendment regarding its discount program and other specified criteria are met.</p>
SB 1185 Chap. 311 Stats. 99 Sen 40-0 Assm 75-0	Polanco	Knox-Keene Act	<u>As Introduced and Enacted:</u> Amends the anti-discrimination provisions of the KKA relating to genetic characteristics to further clarify the definition of “genetic characteristics” and amends the Confidentiality of Medical Information Act to specify that this definition for “genetic characteristics” also applies to the provisions prohibiting disclosure by plans of genetic test results contained in medical records.
*SB 1224 DIED	Speier	Knox-Keene Act	<p><u>As Introduced:</u> A spot bill which may be used to (1) amend the Knox-Keene Act to transfer the responsibility for regulating plans out of the Department of Corporations or (2) make conforming changes to any law(s) as a result of a Governor’s Reorganization Plan.</p> <p><u>As Amended:</u> This bill would expand the provisions for small employer group access to health care coverage to include state contractors who employ from 51 to 100 employees, or who are self-employed, thereby expanding the scope of the criminal sanctions applicable to health care service plans, and thus imposing a state-mandated program.</p>
SB 1254 DIED	Schiff	Civil & Civil Procedure Codes	<u>As Amended:</u> Enacts the “Sunshine in the Courts Act” to prohibit confidentiality agreements or settlement agreements that include secrecy agreements that conceal evidence of financial fraud, a defective product, or an environmental hazard, except as provided.

*Department-Sponsored Bill

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SB 1259 DIED	Brulte	Knox-Keene Act	<u>As Introduced:</u> Provides that every plan contract that is issued, amended, renewed, or delivered on or after January 1, 2000 that provides coverage for dental benefits shall be deemed to cover dental services legally rendered by a registered dental hygienist in alternative practice. Prohibits plans that provide dental benefits from denying membership to registered dental hygienists in alternative practice if membership is required in order for those services to be covered by the plan.
SB 1291 DIED	Polanco	Knox-Keene Act	<p><u>As Introduced:</u> Prohibits specified health care providers from paying hospitals, management services organizations, and other entities owned by health care facilities illegal kickbacks for patient referrals in the form of the purchase of billing, administrative, and other services at rates that exceed the fair market value of the services.</p> <p><u>As Amended:</u> Adds pneumococcus to the list of childhood disease which the Legislature intends the eventual achievement of immunization.</p>
SB 1344 DIED	Peace		2000-2001 Budget Bill.
SB 1359 VETOED (2000) Sen 24-14 Assm 45-29	Karnette	Business & Professions Code	<u>As Enrolled:</u> Deletes existing exemptions under the Unfair Business Practices Act applicable to nonprofit charitable organizations and to persons selling intangibles or newspapers, thus requiring these organizations and individuals to make certain disclosures when soliciting in-home sales as currently required of all individuals who solicit sales at the residence of a prospective buyer. Expands disclosure requirements to all in-home solicitations for sales or orders rather than only in-home solicitations for sales or orders for goods or services, as currently required.
SB 1364 Chap. 941 Stats. 00 Sen 23-14 Assm 70-7	Johnston	Knox-Keene Act Civil Code	<u>As Enacted:</u> Amends the Confidentiality of Medical Information Act to provide that for purposes of the provision that prohibits disclosure by plans of genetic test results contained in medical records, "genetic characteristic" has the same meaning as that set forth in the KKA.
SB 1365 DIED	Murray	Civil Code	<u>As Introduced:</u> Enacts the Identity Theft Victim's Protection Act to make the willful and intentional disclosure of personal information about the victim of identity theft a crime, prohibit a person (including a government agency) from disclosing specified personal information to convicted felons, require persons (including government agencies) that have access to certain personal information to develop reasonable procedures to ensure compliance with the Act and to make these procedures available to the public free of charge, and prohibit disclosure of personal information for marketing purposes upon receipt of specified notice from a victim of identity theft.

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SB 1401 DIED	Schiff	Knox-Keene Act	<u>As Introduced:</u> Makes clean-up changes to the KKA to correct an erroneous section number and deletes an obsolete provision.
SB 1409 DIED	Murray	Privacy Protection Act Civil Code	<u>As Introduced:</u> Enacts the California Privacy Protection Act of 2000.
SB 1419 DIED	Haynes	Civil Code	<u>As Introduced:</u> Establishes the Private Information Protection Act regulating the creation of data bases of private information containing private information by individuals and entities, public and private, except as specified. <u>As Amended:</u> Establishes the Medical Profiling Prohibition Act that prohibits the practice of using medical records or other individually identifiable patient information in the possession of a provider for purposes of determining whether a patient possesses a characteristic that has previously been identified through research as being associated with criminal activity.
SB 1449 DIED	Brulte	Knox-Keene Act	<u>As Introduced:</u> Spot bill. Makes technical amendments to Health & Safety Code §1395.6.
SB 1456 DIED	Kelley	Knox-Keene Act	<u>As Introduced:</u> Requires every health care service plan contract that provides mental health benefit coverage to include coverage, on and after January 1, 2001, for medically necessary treatment of social anxiety disorder.
SB 1471 Chap. 848 Stats. 00 Sen 40-0 Assm 62-12	Schiff	Knox-Keene Act	<u>As Enacted:</u> Prohibits a plan from issuing a lien against an enrollee to recover more than an amount paid to the enrollee's provider for health care services.
SB 1508 Chap. 169 Stats. 00 Sen 39-0 Assm 74-0	Figueroa	Health & Safety Code	<u>As Enacted:</u> Extends the January 1, 2001 repeal date in Statute that permits local health care districts to transfer their assets to for-profit corporations to January 1, 2006 and requires the Legislative Analyst to review and report all transactions to the Legislature by January 1, 2005.

Bill No.	Author	Law or Code	Summary
SB 1630 VETOED (2000) Sen 21-10 Assm 46-28	Hayden	Knox-Keene Act	<u>As Introduced:</u> Requires plans to provide coverage for the treatment of infertility. <u>As Enrolled:</u> Prohibits a licensed tissue bank from providing assisted reproductive technology procedures and services related to oocyte donation unless its medical director is certified in a specialty or subspecialty, as specified. Specified that a violation constitutes unprofessional practice.
SB 1732 Chap. 1069 Stats. 00 Sen 40-0 Assm 76-0	Burton	Knox-Keene Act	<u>As Enacted:</u> Repeals the requirements that workers' compensation insurers (insurers) identify the name of the network that has a written agreement with health care providers entitling the insurer to pay a discounted rate, and instead requires the insurers to only identify the name of the network with which the insurer has an agreement. Makes technical changes to last year's SB 559 (Chap.545, Stats. 1999) by clarifying the disclosure obligations regarding the sale of contracting provider lists which disclose the providers' contracted preferred reimbursement rates.
SB 1738 DIED	Hayden	Knox-Keene Act	<u>As Amended:</u> Creates the Insurance Policyholder and Patient Association, a consumer-based nonprofit tax-exempt public benefit corporation, to protect and advocate for the interests of policyholders and patients regarding the quality and cost of health care and insurance. Requires plans to send membership notices regarding this Association to enrollees.
SB 1746 Chap. 849 Stats. 00 Sen 27-5 Assm 71-4	Figueroa	Knox-Keene Act	<u>As Enacted:</u> Requires plans to notify enrollees if their primary care physician is terminated by the plan.
SB 1764 Chap. 305, Stats. 00 Sen 26-13 Assm 65-10	Chesbro	Knox-Keene Act	<u>As Introduced and Amended:</u> Requires plans that cover hospital, medical, or surgical expenses on a group basis to provide coverage for the treatment of alcohol and other drug abuse. <u>As Enacted:</u> Requires the Legislative Analyst to review existing data relating to the cost effectiveness of substance abuse treatment parity in plans and disability insurance policies and to report to the Legislature its findings in this regard, as well as other information, as specified, pertaining to substance abuse treatment services offered by plans and insurers, the cost impact of these services on employers and employees, and statewide private resources that provide alcohol and drug treatment services.

Bill No.	Author	Law or Code	Summary
SB 1814 Chap. 707 Stats. 00 Sen 30-3 Assm 71-6	Speier	Health & Safety, & Insurance Codes	<p><u>As Enacted:</u> Amends Medicare supplement coverage laws to (1) provide a one-time open enrollment for disabled individuals eligible for Medicare, (2) require a health care service plan to make available to anyone 64 years old or younger not suffering from End-Stage Renal Disease specified Medicare supplement contracts, (3) guarantee issuance of a Medicare supplement policy if an employee's welfare plan ceases to provide some, all, or substantially all of the supplemental health benefits, (4) permit an individual to postpone enrollment while still eligible for an employer-sponsored plan, (5) guarantee the issuance of a Medicare supplement policy that provides minimum pharmacy benefits, and (6) require the Insurance Commissioner to annually prepare a rate guide covering Medicare supplement policies.</p> <p>Adds additional categories of enrollees eligible for guaranteed issue, including an individual who demonstrates, in accordance with guidelines established by the director, that (1) either there was a material breach of contract, including failure to provide timely medically necessary basic health care services consistent with acceptable standards of quality; or there was a material misrepresentation in the marketing. The section defining these additional categories will expire January 1, 2001, unless extended.</p>
SB 1839 VETOED (2000) Sen 24-10 Assm 69-8	Speier	Knox-Keene Act Insurance Code	<p><u>As Enrolled:</u> Requires plans to cover the routine patient care costs incurred in connection with approved clinical trial programs for the treatment of life-threatening prostate cancer.</p>
SB 1875 Chap. 816 Stats. 00 Sen 23-11 Assm 75-0	Speier	Health & Safety Code	<p><u>As Enacted:</u> Requires general acute care hospitals, special hospitals, and surgical clinics, as a condition of licensure, to adopt a formal plan to eliminate or substantially reduce medication-related errors. Requires each facility" plan to be submitted to the Department of Health Services by January 1, 2002 and to be implemented by January 1, 2005.</p>
SB 1903 Chap. 1066 Stats. 00 Sen 40-0 Assm 76-0	Speier	Knox-Keene Act Civil Code	<p><u>As Enacted:</u> Amends the Confidentiality of Medical Information Act to make provisions prohibiting sharing, selling and use of medical information applicable to corporations and affiliates and allows patients to attach a written addendum on disputed portions of their medical record.</p>
SB 1922 DIED	Speier	Knox-Keene Act	<p><u>As Introduced:</u> Requires plans to uniformly impose on pharmacies any limitations or co-payments for prescription drug benefits.</p>
SB 1934 DIED	Polanco	Knox-Keene Act	<p><u>As Amended:</u> Prohibits plan contracts from imposing limitations on damages that may be awarded in arbitration, as specified.</p>

Bill No.	Author	Law or Code	Summary
SB 1940 DIED	Bowen	Business & Professions Code	<u>As Amended:</u> prohibit a person or entity that is licensed, regulated, or certified by the Board of Pharmacy, as specified, from intentionally sharing, selling, or otherwise using any medical information regarding a consumer for marketing or promotional purposes without obtaining a valid prior written consent from the consumer that both complies with the requirements of existing law and with certain additional requirements.
SB 2007 DIED	Speier	Knox-Keene Act Business & Professions, & Government Codes	<u>As Introduced:</u> Enacts the Quality in Health Care Contracts Act to allow physicians to collectively bargain without violating antitrust laws. <u>As Amended:</u> Requires the Department to establish and maintain a system of receiving, reviewing, and acting on provider complaints.
SB 2020 DIED	Speier	Knox-Keene Act Education, & Insurance Codes	<u>As Amended:</u> Requires the Department to develop a package of materials on health insurance programs available to children.
SB 2022 DIED	Speier	Knox-Keene Act Insurance Code	<u>As Introduced:</u> Prohibits plans that issue individual coverage from imposing a pre-existing condition exclusion for pregnancy or maternity care.
SB 2027 VETOED (2000) Sen 32-2 Assm 75-1	Sher	Public Records Act	<u>As Enrolled:</u> Amends the California Public Records Act to allow persons to appeal to the Attorney General any public agency's denial of a request to inspect public records
SB 2046 Chap. 852 Stats. 00 Sen 22-6 Assm 65-8	Speier	Knox-Keene Act	<u>As Enacted:</u> Expands existing law regarding coverage for off-label use of prescription drugs to include chronic and seriously debilitating conditions.
SB 2069 DIED	Perata	Knox-Keene Act Insurance Code	<u>As Introduced:</u> Permits a plan's notification of the denial, delay, or modification of a request for authorization for the provision of health care services to an enrollee to be initially provided to the provider by facsimile, as well as by telephone.

Bill No.	Author	Law or Code	Summary
SB 2083 Chap. 696 Stats. 00 Sen 40-0 Assm 70-2	Speier	Knox-Keene Act	<u>As Introduced:</u> A spot bill that makes a technical clean-up change to Health & Safety Code Section 1347.15 by correcting an erroneous cross-reference. <u>As Enacted:</u> Expands the authority of San Mateo County to provide specified health care services.
*SB 2094 Chap. 1067 Stats. 00 Sen 40-0 Assm 77-0	Senate Insurance	Knox-Keene Act	<u>As Enacted:</u> A bill sponsored by the Department that makes various technical clean-up changes to certain 1999 Senate Bills regarding managed care.
SB 2136 Chap. 856 Stats. 00 Sen 40-0 Assm 76-0	Dunn	Knox-Keene Act	<u>As Enacted:</u> Requires the Advisory Committee on Managed Health Care, in the Department, after having sought comment from a broad and balanced range of interested parties, to recommend standards to the Director of the Department of Managed Care for a uniform medical quality audit system, which would be required to include a single periodic medical quality audit. Requires the recommendations to include a list of those private sector accreditation organizations, if any, that have standards comparable to the recommended system, and the capability and expertise to accredit, audit, or credential providers. Authorizes the director to approve private sector accreditation organizations as qualified organizations to perform single periodic medical quality audits.

*Department-Sponsored Bill